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TO: Examiner Michael J. Araj, Group Art Unit 3733

FAX NUMBER: 571-273-8300

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FROM: Douglas A. Collier

DIRECT DIAL: (317) 238-6333

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RE: Request for Continued Examination for U.S. Patent Application No. 10/825,962 to Aaron D. Markworth

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	Application Number	10/825,962									
TRANSMITTAL	Filing Date	April 16, 2004									
FORM	First Named Inventor	Aaron D. Markw									
,	Art Unit	3733									
a to the state of	Examiner Name	Michael J. Araj									
(to be used for all correspondence after initial filing)	Attorney Docket Number	MSD\-951/050-0001US01									
Total Number of Pages In This Submission	 										
ENCLOSURES (Check all that apply)											
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/dectaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD	ddress	Appeal of Appeal (Appeal (Appe	Enclosure(s) (please Identify : neet; Request for Continued							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT											
Firm Name Krieg/DeVault LLP Signature Printed name Douglas A. Collier	ellier										
Date June 24, 2008		Reg. No. 43	,556								
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			18).	Complete if Known						
				Application Number		10/825,962				
FEE TRANSMITTAL For FY 2005 Applicant claims small entity status. See 37 CFR 1.27			- -	Filing Date		April 16, 2004				
			Ļ	First Named Inven	tor Aaron	Aaron D. Markworth				
				Examiner Name	Michae	Michael J. Araj				
Applicant claims small	sitily status.	366 07 01 17 1.27		Art Unit	3733					
TOTAL AMOUNT OF PAYMENT (\$) 1,830.00				Attorney Docket N	lo. MSDI-	MSDI-951/050-0001US01				
METHOD OF PAYMENT (check all that apply)										
Check ✓ Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 12-2424 Deposit Account Name: Krieg DeVault LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
V under 27 CED 1.16 and 1.17										
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FEE CALCULATION		 								
1. BASIC FILING, SEAR	CH, AND E	XAMINATION FE	ES							
	FILING FI	EES S			EXAMINATI	ON FEES all Entity				
Application Type		nall Entity Fee (\$) Fe	ee (\$)	Small Entity Fee (\$)		Fee (\$)	Fees Paid (\$)			
Utility	300		500	250	200	100	0.00			
Design	200	100 1	100	50	130	65				
Plant	200	100 3	300	150	160	80				
Reissue	300	150 5	500	250	600	300				
Provisional	200	100	0	0	0	0				
2. EXCESS CLAIM FEES Small Entity										
Fee Description							<u>Fee (\$)</u> 25			
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)						50 200	100			
Multiple dependent c		icitiding Aciastics	''			360	180			
Total Claims	Extra Claim	s <u>Fee (\$)</u>	Fee	Pald (\$)		Multiple Dep	endent Claims			
- 20 or HP =		x=		0.00	•	Fee (\$)	Fee Paid (\$)			
HP = highest number of total	l claims paid for, Extra Claim:		Foo	Paid (\$)						
Indep. Claims - 3 or HP =		х =		0.00						
HP = Highest number of independent claims paid for, if greater than 3.										
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereor Fee (3) Fee Paid (3)										
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 3 Mo, Extension of Time (\$1020): RCE (\$810) 1830.00										
SUBMITTED BY / / O O OOO										
Registration No.							3 317-636-4341			
Name (Orlet/Time)	SEA UIC	olles_	1	(Attorney/Agent) 43	J,000		24, 2008			

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